

County of Los Angeles  
Department of Public Works  
Building and Safety / Land Development

BUILDING PERMIT  
BL 0600 9409010019

EAST LA # 0600  
5119 BEVERLY  
LOS ANGELES CA  
Phone: (213) 260-3450 Ext:

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation insurance, or a certified copy thereof (Sec. 3800, Lab. C.).

Policy No. \_\_\_\_\_ Company \_\_\_\_\_

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

CERTIFICATE OF EXEMPTION FROM WORKERS'  
COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number \_\_\_\_\_ Lic. Class \_\_\_\_\_

Contractor \_\_\_\_\_ Date \_\_\_\_\_

☐ I am exempt under Sec. \_\_\_\_\_

B.&P.C. for this reason \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name \_\_\_\_\_

Lender's Address \_\_\_\_\_

I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Ramon Vega 11-194  
Signature of Applicant or Agent Date

BUILDING ADDRESS:

3940 DWIGGINS ST  
LCNT CA 90063

LOCALITY:

E. LOS ANGELES, CA 90022

NEAREST CROSS STREET:

GAGE AVENUE

ALIAS:

LEGAL ID:

TR: 648 LT: 340

ASSR INFO NBR:

5228-009-019

OWNER:

VEGA, RAMONA  
3940  
DWIGGINS ST  
LOS ANGELES CA 90063

TEL. NO:

CONTRACTOR:

VEGA, RAMONA  
3940 DWIGGINS STREET  
LOS ANGELES, CA 90063

TEL. NO:

(213) 263-4085

LIC. NO:

NONE

APPLICANT:

VEGA, RAMONA  
3940 DWIGGINS STREET  
LOS ANGELES, CA 90063

TEL. NO:

(213) 263-4085

ARCHITECT OR ENGINEER:

TEL. NO:

LIC. NO:

ACTION:

REPAIR

DESCRIPTION OF WORK:

REINFORCE FOUNDATION (EARTHQUAKE)

USE OF EXISTING BLDG:

RESIDENCE

ISSUED ON: PROCESSED BY: EXPIRES ON:

11/01/94 LT 09/01/95

FINAL DATE: FINAL BY:

1/31/95 [Signature]

SQ. FT. SIZE: NO. OF STORIES: NO. OF FAMILIES:

240 1 1

SIZE OF LOT: BLDGS. NOW ON LOT: WITHIN 1000 FT. OF SCHOOL?:

0 X 0 1 NO

USE ZONE: MAP NO: FIRE ZONE:

R-1 129-233 3

SPECIAL CONDITIONS:

OCCUP GROUP-

EXIST: R3 NEW: R3

TYPE CONST: STAT. CLASS: DWELL UNITS: APT/CON:

V 21 0 NO

REQUIRED TOTAL SETBACK FROM EXIST

SET BACK: YARD: HWY: PROP LINE: WIDTH:

FRONT PL 5 10 15 30

SIDE PL 5 0 5 0

SEWER MAP

BOOK: PAGE: VALUATION: CMP:

D 97 1,500 01

FEES PAID-

FEE DESCRIPTION: QUANTITY: UOM: AMOUNT:

D1 PLAN/CHECK W/O EN-HC 1500.00 VALUATN 0.00

AA BLDG PERMIT ISSUANCE 0.00

AC STRONG MOTION RESID 1500.00 VALUATN 0.00

D2 PERMIT W/O EN-HC 1500.00 VALUATN 0.00

TOTAL FEES 0.00

